Ownership:
Highest Level License:
Operate in Conjunction with CBRF?
Title 18 (Medicare) Certified?
Average Daily Census:

Non-Profit Church Related Skilled No Yes 54

**************************************	****	3U **************	******	*******	******	*********	******
Services Provided to Non-Residents		Age, Sex, and Primary Diagn	Length of Stay (12/31/0	0) %			
Home Health Care Supp. Home Care-Personal Care Supp. Home Care-Household Services Day Services Respite Care Adult Day Care Adult Day Health Care Congregate Meals Home Delivered Meals Other Meals	No No No No No No No No No Yes	Primary Diagnosis Developmental Disabilities Mental Illness (Org./Psy) Mental Illness (Other) Alcohol & Other Drug Abuse Para-, Quadra-, Hemiplegic Cancer Fractures Cardiovascular	% 0. 0 22. 0 8. 0 0. 0 0. 0 2. 0 0. 0 8. 0	Age Groups Under 65 65 - 74 75 - 84 85 - 94 95 & Over	4. 0 6. 0 30. 0 48. 0 12. 0	Less Than 1 Year 1 - 4 Years More Than 4 Years ************************ Full-Time Equivalor Nursing Staff per 100 (12/31/00)	
Transportation Referral Service Other Services Provide Day Programming for Mentally III Provide Day Programming for Developmentally Disabled ************************************	No No No No	Cerebrovascul ar Di abetes Respi ratory Other Medical Conditions	22. 0 14. 0 6. 0 18. 0 100. 0	Sex Male Female	34. 0 66. 0 100. 0	RNs LPNs Nursing Assistants Aides & Orderlies	8. 0 12. 2 49. 7

Method of Reimbursement

	Medicare (Title 18)		(Medicaid (Title 19)			Other Pri va		ri vate	ate Pay		Managed Care			Percent		
			Per Die	m		Per Die	m		Per Die	m		Per Dien	1	Ŭ	Per Diem	Total	Of All
Level of Care	No.	%	Rate	No.	%	Rate	No.	%	Rate	No	. %	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0%
Skilled Care	0	0. 0	\$0.00	27	84. 4	\$98. 39	0	0. 0	\$0.00	16	88. 9	\$111.00	0	0. 0	\$0.00	43	86. 0%
Intermediate				5	15.6	\$81. 10	0	0.0	\$0.00	2	11. 1	\$102.00	0	0.0	\$0.00	7	14.0%
Limited Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Di sabl ed				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain In	. 0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Depender	nt 0	0.0	\$0. 00	0	0.0	\$0. 00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	0	0.0		32 1	00.0		0	0.0		18	100.0		0	0.0		50	100.0%

Admissions, Discharges, and Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00 Deaths During Reporting Period % Needing Total Activities of Assi stance of Percent Admissions from: % Totally Number of Private Home/No Home Health 39.0 Daily Living (ADL) Independent One Or Two Staff Dependent Resi dents Private Home/With Home Health 0.0 Baťhi ng 6.0 **68**. 0 26. 0 50 Other Nursing Homes 0.0 Dressi ng 10.0 **66.** 0 24. 0 50 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals 61.0 Transferri ng 20.0 **58.** 0 50 22. 0 Toilet Use 22.0 58.0 20.0 50 0.0 82.0 50 0.0 Eati ng *********** 8.0 10.0 Other Locations 0.0 Total Number of Admissions Continence Special Treatments 41 Receiving Respiratory Care Receiving Tracheostomy Care Receiving Suctioning Receiving Ostomy Care Percent Discharges To: Indwelling Or External Catheter 4.0 8. 0 Private Home/No Home Health 31. 1 Occ/Freq. Incontinent of Bladder **54.** 0 0.0 Private Home/With Home Health 6. 7 Occ/Freq. Incontinent of Bowel 24. 0 0.0 Other Nursing Homes 11.1 2. 0 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals Receiving Tube Feeding Receiving Mechanically Altered Diets 8.9 0.0 Mobility Physically Restrained 0.0 6.0 38.0 0.0 Other Locations 0.0 Skin Care Other Resident Characteristics 0.0 Deaths 42.2 With Pressure Sores Have Advance Directives 100.0 Total Number of Discharges With Rashes Medi cati ons 0.0 Receiving Psychoactive Drugs 45 40.0 (Including Deaths)

Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities

	Thi s	Other Hospital-	Al l		
	Facility	Based Facilities	Facilties		
	%	% Ratio	%	Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds	93. 1	87. 5 1. 06	84. 5	1. 10	
Current Residents from In-County	72. 0	83. 6 0. 86	77. 5	0. 93	
Admissions from In-County, Still Residing	31. 7	14. 5 2. 19	21. 5	1.47	
Admissions/Average Daily Census	75. 9	194. 5 0. 39	124. 3	0.61	
Di scharges/Average Daily Census	83. 3	199. 6 0. 42	126. 1	0. 66	
Discharges To Private Residence/Average Daily Census	31. 5	102. 6 0. 31	49. 9	0.63	
Residents Receiving Skilled Care	86. 0	91. 2 0. 94	83. 3	1.03	
Residents Aged 65 and Older	96. 0	91. 8 1. 05	87. 7	1.09	
Title 19 (Medicaid) Funded Residents	64. 0	66. 7 0. 96	69. 0	0. 93	
Private Pay Funded Residents	36. 0	23. 3 1. 54	22. 6	1. 59	
Developmentally Disabled Residents	0. 0	1.4 0.00	7. 6	0.00	
Mentally Ill Residents	30. 0	30. 6 0. 98	33. 3	0. 90	
General Medical Service Residents	18. 0	19. 2 0. 94	18. 4	0. 98	
Impaired ADL (Mean)*	46. 8	51. 6 0. 91	49. 4	0. 95	
Psychological Problems	40. 0	52. 8	50. 1	0.80	
Nursing Care Required (Mean)*	6. 0	7. 8 0. 77	7. 2	0.84	